FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D



NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

	1266790								
	OMB APPROVAL								
O	MB Number:	3235-0076							
E	cpires:	May 31, 2005							
Es	Estimated average burden								
ho	hours per response 1								
	SEC USE ONLY 9								
	Prefix	Serial							
	DATE RECEIVED								

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series C Preferred Stock Financing							
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule 506 ☐ Section 4(6)	ULOE RECEIVEU						
Type of Filing:							
A. BASIC IDENTIFICATION DATA	< < WAY 2 @ 2004 /						
Enter the information requested about the issuer	The state of the s						
Name of Issuer (☐ check if this is an amendment and name has changed, and indicate change.) Cellmania, Inc.							
Address of Executive Offices (Number and Street, City, State, Zip Code) 82 Pioneer Way, Suite 108, Mountain View, CA 94041	Telephone Number (Including Area Code) 650-281-9220						
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)						
Brief Description of Business	- ACTOCED						
Type of Business Organization	AMOCE33FR						
☐ corporation ☐ limited partnership, already formed ☐ other (please spec ☐ business trust ☐ limited partnership, to be formed	ify): MAY 24 2004						
Actual or Estimated Date of Incorporation or Organization: Month Year	THOMSON FINANCIAL Actual						
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) D E							

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply ☐ General and/or ☐ Promoter Deneficial Owner Executive Officer Managing Partner Full Name (Last name first, if individual) Nag, Ronjon Business or Residence Address (Number and Street, City, State, Zip Code) 82 Pioneer Way, Suite 108, Mountain View, CA 94041 Check Box(es) that Apply ☐ Promoter ☐ General and/or Beneficial Owner Executive Officer Managing Partner Full Name (Last name first, if individual) Berry, Neerav Business or Residence Address (Number and Street, City, State, Zip Code) 82 Pioneer Way, Suite 108, Mountain View, CA 94041 Check Box(es) that Apply ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ General and/or Managing Partner Full Name (Last name first, if individual) Porter, Kelly 82 Pioneer Way, Suite 108, Mountain View, CA 94041 ☐ Executive Officer ☐ Director ☐ General and/or Check Box(es) that Apply ☐ Promoter Beneficial Owner Managing Partner Full Name (Last name first, if individual) Kiwi II Ventura - Services De Consultoria, S.A. Business or Residence Address (Number and Street, City, State, Zip Code) Via Pretovio 3-6900, Lagano - CH, Italy Check Box(es) that Apply ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner ☐ Executive Officer Check Box(es) that Apply ☐ Promoter ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

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					B. II	NFORM	ATION A	BOUT O	FFERIN	G				
												 	<u>Yes</u>	No
1. "H	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									И				
			Answe	r also in A	Appendix,	Column 2	2, if filing	under UL	OE.					
2. V	√hat is th	e minim	um inves	tment that	will be a	ccepted fr	om any in	idividual?					\$	
													<u>Yes</u>	<u>No</u>
3. D	oes the o	ffering p	ermit joir	nt ownersl	hip of a si	ngle unit?							Π	
o li o	r similar sted is ar f the brol	remuner associa ker or de	ation for ted perso aler. If r	solicitation n or agent	on of purc of a brok five (5) p	hasers in er or deal ersons to	connectio er register	n with sal ed with th	es of secu ne SEC an	rities in the	ne offerin a state or	ly, any commission g. If a person to be states, list the name or dealer, you may		
Full Nam	e (Last n	ame first,	if individ	lual)										
Business	or Reside	ence Add	ress (Nun	nber and S	treet, City,	State, Zip	Code)							
			`			,	,							
Name of	Associate	ed Brokei	or Deale	r						<u></u>				
States in	Which Pe	erson List	ed Has Se	olicited or	Intends to	Solicit Pu	rchasers							
(Checl	z "Δ11 Sta	ites" or cl	heck indiv	zidual Stati	ac)								Π Δ11	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		States
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[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[VJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]		
Full Nam	e (Last n	ame first,	if individ	lual)										
Business	or Reside	ence Add	ress (Nun	nber and S	treet, City,	State, Zip	Code)							
Name of	Associate	ed Brokei	or Deale	r	<u></u>									·
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				olicited or										
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI] ————	[WY]	[PR] 		
Full Nam	ie (Last n	ame first,	if individ	lual)										
Business	or Reside	ence Add	ress (Nun	nber and S	treet, City,	State, Zip	Code)							
Name of	Associate	ed Broker	or Deale	r										
runic of	7133001410	ca Broker	of Beare	•										
States in	Which Pe	erson List	ted Has So	olicited or	Intends to	Solicit Pu	rchasers							
(Chec	k "All Sta	ites" or cl	heck indiv	idual Stat	es)							,	□ All	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI] [MS]	[ID] [MO]		
[IL] [MT] [RI]	[IL] [NE] [SC]	[IA] [NV] [SD]	[KS] [NH] [TN]	[KY] [NJ] [TX]	[LA] [NM] [UT]	[ME] [NY] [VT]	[MD] [NC] [VA]	[MA] [ND] [WA]	[MI] [OH] [WV]	[MN] [OK] [WI]	[OR] [WY]	[MO] [PA] [PR]		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box TM and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Aggregate Amount Already Offering Price Sold Debt \$8,542,759.96 \$8,542,759.96 Equity..... ∏ Preferred ☐ Common Other (Specify) Total \$8,542,759.96 \$8.542,759.96 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Number Aggregate Dollar Amount Investors of Purchases Accredited Investors 23 Non-accredited Investors ______ 0 Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1. Dollar Amount Type of Type of offering Security Sold Rule 505 Rule 504......_____ 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees. Printing and Engraving Costs.... Legal Fees..... \$40,000 Accounting Fees Engineering Fees. Sales Commissions (specify finders' fees separately)..... Other Expenses (identify)

\$40,000

Total

h Enter the difference between the agares	rate offering price given in reconnects Boot	C - Ouncti	on 1 and				
b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds" to the issuer."						\$ <u>8,502,759.96</u>	
	nt for any purpose is not known, furnish an total of the payments listed must equal	estimate ar	id check				
			Payments to Officers, Directors & Affiliates		•	nents to thers	
Salaries and fees			\$ <u> </u>	_ 0	\$	0	
Purchase of real estate	Purchase of real estate						
Purchase, rental or leasing and installat		\$0	_ 0	\$	0		
Construction or leasing of plant buildir		\$0	🗆	\$	0		
offering that may be used in exchange	ling the value of securities involved in this for the assets or securities of another issuer		S0		\$	0	
Repayment of indebtedness		S	_ 0	\$8,302,759.90			
Working capital			\$ 200,000		s		
Other (specify):		□	\$0	_ =	\$	0	
			so	_ 🗆	\$	0	
			\$0	_ □	S	0	
Total Payments Listed (column totals a	*******	□ \$ <u>8,502,759.96</u>					
	D. FEDERAL SIGNATUR	E					
The issuer has duly caused this notice to be signature constitutes an undertaking by the information furnished by the issuer to any non	ssucr to furnish to the U.S. Securities and	Exchange	Commission, upon	under R written i	ule 505, the request of	he follo its stafi	
Issuer (Print or Type) Cellmania, Inc.	Signature	VE	3 ,	Date April	15, 2004		
Name of Signer (Print or Type) Ronjon Nag	Title of Signer (Print or Tyr Chief Executive Officer	pe)		<u> </u>			

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)